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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET					Application Number Filin 10/826,838 16			Filing Date 16 Apri	ling Date 6 April, 2004			☐ To be Mailed		
T L	Substitute	e for Form I	PTO-1360		Applicant(s) SHITAGAKI ET AL.						Page 1 of 1			
					* May be used for additional claims or amendments									
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 12/11/2007		AFTER SEC. AMENDMENT		*		*		*			
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Claims							Claims			<u> </u>				

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